
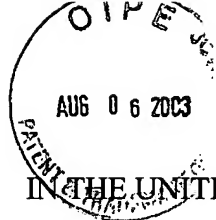


3761

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				<b>Docket No.</b> TPP 31402A	
<b>Applicant(s):</b> Amar LULLA et al					
<b>Serial No.</b> 10/617,850	<b>Filing Date</b> July 14, 2003	<b>Examiner</b> Unassigned	<b>Group Art Unit</b> 3761		
<b>Invention:</b> SPACER DEVICE FOR INHALER					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	<b>CLAIMS REMAINING AFTER AMENDMENT</b>	<b>HIGHEST # PREV. PAID FOR</b>	<b>NUMBER EXTRA CLAIMS PRESENT</b>	<b>RATE</b>	<b>ADDITIONAL FEE</b>
TOTAL CLAIMS	11 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	4 -	4 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					\$0.00
<div style="display:flex; justify-content:space-between;"><div><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-4375 A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div><div style="text-align:right;"><b>RECEIVED</b> <b>AUG 13 2003</b></div></div>					
<div style="text-align:center;"> _____ <i>Signature</i></div>			<b>Dated: August 6, 2003</b> <b>TECHNOLOGY CENTER R3700</b>		
<b>Thomas P. Pavelko, Esquire</b> <b>STEVENS, DAVIS, MILLER &amp; MOSHER, L.L.P.</b> <b>1615 L Street, N.W., Suite 850</b> <b>Washington, D.C. 20036</b> <b>Telephone: (202) 785-0100</b> <b>Facsimile: (202) 408-5200 or (202) 408-5088</b>			<div>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.</div> <div style="border-top:1px solid black; padding-top:5px; text-align:center;"><i>Signature of Person Mailing Correspondence</i></div> <div style="border-top:1px solid black; padding-top:5px; text-align:center;"><i>Typed or Printed Name of Person Mailing Correspondence</i></div>		
<b>cc:</b>					



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Amar LULLA et a.l

Group Art Unit: 3761

Serial No.: 10/617,850

Filed: July 14, 2003

For: SPACER DEVICE FOR INHALER

SECOND PRELIMINARY AMENDMENT

RECEIVED

AUG 13 2003

Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

TECHNOLOGY CENTER R3700

Sir:

Further to the Preliminary Amendment of July 14, 2003, please amend the above identified application as follows: